

State of Maine Department of Health & Human Services Section 25, Dental Services Rates/Fee Schedule Effective Date January 1, 2023 - December 31, 2023			
Code	CDT Description	1/1/2023 Maximum Allowance	7/1/2023 Maximum Allowance
I. Diagnostic			
D0120	Periodic oral evaluation - established patient	\$32.06	\$34.70
D0140	Limited oral evaluation - problem focused	\$53.90	\$58.34
D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	\$46.39	\$50.21
D0150	Comprehensive oral evaluation - new or established patient	\$61.41	\$66.47
D0160	Detailed and extensive oral evaluation - problem focused, by report	\$70.75	\$76.58
D0170	Re-evaluation – limited, problem focused, (established patient; not post-operative visit)	\$41.22	\$44.62
D0180	Comprehensive periodontal evaluation: new or established patient	\$70.28	\$76.07
D0190	Screening of a patient	\$20.47	\$22.16
D0210	Intraoral - complete series of radiographic images	\$91.90	\$99.47
D0220	Intraoral - periapical, first radiographic image	\$20.47	\$22.16
D0230	Intraoral - periapical, each additional radiographic image	\$15.01	\$16.25
D0240	Intraoral - occlusal radiographic image	\$22.52	\$24.38
D0250	Extra-oral - 2D projection radiographic image created using a stationary radiation source, and detector	\$32.66	\$35.35
D0251	Extra-oral posterior dental radiographic image	\$32.66	\$35.35
D0270	Bitewing - single radiographic image	\$20.47	\$22.16
D0272	Bitewings - two radiographic images	\$32.75	\$35.45
D0273	Bitewings - three radiographic images	\$38.55	\$41.73
D0274	Bitewings - four radiographic images	\$44.35	\$48.00
D0277	Vertical bitewings - 7 to 8 radiographic images	\$66.86	\$72.37
D0310	Sialography	\$71.45	\$77.34
D0320	Temporomandibular joint arthrogram, including injection	\$155.30	\$168.10
D0321	Other temporomandibular joint radiographic images, by report	\$97.71	\$105.76
D0330	Panoramic radiographic image	\$83.24	\$90.10
D0340	2D cephalometric radiographic image – acquisition, measurement and analysis	\$56.22	\$60.85
D0460	Pulp vitality tests	\$29.78	\$32.23
D0470	Diagnostic Casts	\$77.78	\$84.19
D0601	Caries risk assessment and documentation, with a finding of low risk	\$0.00	\$0.00
D0602	Caries risk assessment and documentation, with a finding of moderate risk	\$0.00	\$0.00
D0603	Caries risk assessment and documentation, with a finding of high risk	\$0.00	\$0.00
D0604	Antigen testing for a public health related pathogen, including coronavirus	\$48.08	\$52.04
D0605	Antibody testing for a public health related pathogen, including coronavirus	\$56.94	\$61.63
II. Preventive			

Code	CDT Description	1/1/2023 Maximum Allowance	7/1/2023 Maximum Allowance
D1110	Prophylaxis - Adult	\$65.91	\$71.34
D1120	Prophylaxis - Child	\$50.49	\$54.65
D1206	Topical application of fluoride varnish	\$24.56	\$26.58
D1208	Topical application of fluoride - excluding varnish	\$24.56	\$26.58
D1310	Nutritional Counseling for Control of Dental Disease	\$24.56	\$26.58
D1320	Tobacco counseling for the control and prevention of oral disease	\$28.38	\$30.72
D1321	Counseling for the control and prevention of adverse oral, behavioral, and systemic health effects associated with high-risk substance use	\$14.00	\$15.15
D1330	Oral hygiene instructions	\$24.56	\$26.58
D1351	Sealant - per tooth	\$30.70	\$33.23
D1352	Preventive Resin Restoration in a Moderate to High Caries Risk Patient - Permanent Tooth	\$76.42	\$82.72
D1354	Application of caries arresting medicament - per tooth	\$25.70	\$27.82
D1355	Caries preventive medicament application - per tooth	\$18.98	\$20.54
D1510	Space maintainer - fixed, unilateral - per quadrant	\$236.14	\$255.60
D1516	Space maintainer - fixed - bilateral, maxillary	\$330.91	\$358.18
D1517	Space maintainer - fixed - bilateral, mandibular	\$330.91	\$358.18
D1520	Space maintainer – removable, bilateral	\$166.15	\$179.84
D1526	Space maintainer - removable - bilateral, maxillary	\$247.15	\$267.52
D1527	Space maintainer - removable - bilateral, mandibular	\$247.15	\$267.52
D1551	Re-cement or re-bond bilateral space maintainer - maxillary	\$44.68	\$48.36
D1552	Re-cement or re-bond bilateral space maintainer - mandibular	\$44.68	\$48.36
D1553	Re-cement or re-bond unilateral space maintainer - per quadrant	\$44.68	\$48.36
D1556	Removal of fixed unilateral space maintainer - per quadrant	\$50.50	\$54.66
D1557	Removal of fixed bilateral space maintainer - maxillary	\$50.50	\$54.66
D1558	Removal of fixed bilateral space maintainer - mandibular	\$50.50	\$54.66
D1575	Distal shoe space maintainer - fixed, unilateral - per quadrant	\$208.05	\$225.19
III. Restorative			
D2140	Amalgam - one surface, primary or permanent	\$78.29	\$84.74
D2150	Amalgam - two surfaces, primary or permanent	\$95.95	\$103.86
D2160	Amalgam - three surfaces, primary or permanent	\$113.50	\$122.85
D2161	Amalgam - four or more surfaces, primary or permanent	\$137.34	\$148.66
D2330	Resin-based composite - one surface, anterior	\$78.29	\$84.74
D2331	Resin-based composite - two surfaces, anterior	\$95.95	\$103.86
D2332	Resin-based composite - three surfaces, anterior	\$113.50	\$122.85
D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	\$137.34	\$148.66
D2390	Resin-based composite crown, anterior	\$257.60	\$278.83
D2391	Resin-based composite - one surface, posterior	\$103.16	\$111.66
D2392	Resin-based composite - two surfaces, posterior	\$124.04	\$134.26

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D2393	Resin-based composite - three surfaces, posterior	\$149.63	\$161.96
D2394	Resin-based composite - four or more surfaces, posterior	\$170.50	\$184.55
D2740	Crown – porcelain/ceramic substrate	\$569.28	\$616.19
D2750	Crown – porcelain fused to high-noble metal	\$638.62	\$691.24
D2751	Crown – porcelain fused to predominantly base metal	\$488.74	\$529.01
D2752	Crown – porcelain fused to noble metal	\$532.44	\$576.31
D2915	Re-cement or re-bond indirectly fabricated or prefabricated post and core	\$61.41	\$66.47
D2920	Re-cement or re-bond crown	\$66.32	\$71.78
D2928	Prefabricated porcelain/ceramic crown – permanent tooth	\$256.45	\$277.58
D2929	Prefabricated porcelain/ceramic crown - primary tooth	\$210.52	\$227.87
D2930	Prefabricated stainless steel crown - primary tooth	\$140.72	\$152.32
D2931	Prefabricated stainless steel crown - permanent tooth	\$171.42	\$185.55
D2932	Prefabricated resin crown	\$159.66	\$172.82
D2933	Prefabricated stainless steel crown with resin window	\$186.26	\$201.61
D2934	Prefabricated esthetic coated stainless steel crown – primary tooth	\$186.26	\$201.61
D2940	Protective restoration	\$57.93	\$62.70
D2950	Core buildup, including any pins when required	\$126.91	\$137.37
D2951	Pin retention - per tooth, in addition to restoration	\$28.66	\$31.02
D2954	Prefabricated post and core in addition to crown	\$168.66	\$182.56
D2980	Crown repair necessitated by restorative material failure	\$111.55	\$120.74
D2999	Unspecified restorative procedure, by report	By Report	By Report
IV. Endodontics			
D3110	Pulp cap - direct (excluding final restoration)	\$37.89	\$41.01
D3120	Pulp cap - indirect (excluding final restoration)	\$37.89	\$41.01
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament	\$124.52	\$134.78
D3221	Pulpal debridement, primary and permanent teeth	\$123.69	\$133.88
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	\$148.40	\$160.63
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	\$119.40	\$129.24
D3240	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	\$157.48	\$170.46
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	\$578.58	\$626.25
D3320	Endodontic therapy, premolar tooth (excluding final restoration)	\$683.72	\$740.06
D3330	Endodontic therapy, molar tooth (excluding final restoration)	\$919.32	\$995.07
D3346	Retreatment of previous root canal therapy - anterior	\$734.00	\$794.48
D3347	Retreatment of previous root canal therapy - premolar	\$861.73	\$932.74
D3348	Retreatment of previous root canal therapy - molar	\$944.96	\$1,022.82
D3351	Apexification/recalcification - initial visit (apical closure/calcific repair of perforations, root resorption, etc.)	\$125.90	\$136.27
D3352	Apexification/recalcification - interim medication replacement	\$125.90	\$136.27

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D3353	Apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of perforations, root resorption, etc.)	\$176.43	\$190.97
D3410	Apicoectomy - anterior	\$339.52	\$367.50
D3421	Apicoectomy – premolar (first root)	\$361.74	\$391.55
D3425	Apicoectomy – molar (first root)	\$413.30	\$447.36
D3426	Apicoectomy (each additional root)	\$187.33	\$202.77
D3999	Unspecified endodontic procedure, by report	By Report	By Report
V. Periodontics			
D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant	\$303.86	\$328.90
D4211	Gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant	\$133.79	\$144.81
D4240	Gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant	\$385.02	\$416.75
D4241	Gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant	\$255.86	\$276.94
D4245	Apically positioned flap	\$315.30	\$341.28
D4260	Osseous surgery (including elevation of a full thickness flap and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant	\$608.51	\$658.65
D4261	Osseous surgery (including elevation of a full thickness flap closure) - one to three contiguous teeth or tooth bounded spaces per quadrant	\$448.34	\$485.28
D4263	Bone replacement graft - retained natural tooth - first site in quadrant	\$388.27	\$420.26
D4264	Bone replacement graft - retained natural tooth - each additional site in quadrant	\$288.22	\$311.97
D4270	Pedicle soft tissue graft procedure	\$425.73	\$460.81
D4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant or edentulous tooth position in graft	\$594.70	\$643.70
D4278	Free soft tissue graft procedure (including recipient and donor surgical sites) each additional contiguous tooth, implant or edentulous tooth position in the same graft site	\$328.13	\$355.17
D4341	Periodontal scaling and root planing - four or more teeth per quadrant	\$153.18	\$165.80
D4342	Periodontal scaling and root planing, 1 - 3 teeth per quadrant	\$109.84	\$118.89
D4346	Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation	\$62.77	\$67.94
D4355	Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit	\$102.34	\$110.77
D4910	Periodontal maintenance	\$97.16	\$105.17
D4999	Unspecified periodontal procedure, by report	By Report	By Report
VI. Prosthodontics (Removable)			
D5110	Complete denture - maxillary	\$686.98	\$743.59
D5120	Complete denture - mandibular	\$686.98	\$743.59
D5130	Immediate denture - maxillary	\$712.56	\$771.27

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D5140	Immediate denture - mandibular	\$712.56	\$771.27
D5211	Maxillary partial denture - resin base (including retentive/clasping materials, rest and teeth).	\$465.66	\$504.03
D5212	Mandibular partial denture - resin base (including retentive/clasping materials, rests and teeth)	\$465.66	\$504.03
D5213	Maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)	\$709.24	\$767.68
D5214	Mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping materials,rests and teeth)	\$709.24	\$767.68
D5221	Immediate maxillary partial denture – resin base (including any conventional clasps, rests and teeth)	\$399.65	\$432.58
D5222	Immediate mandibular partial denture – resin base (including any conventional clasps, rests and teeth)	\$399.65	\$432.58
D5223	Immediate maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and	\$761.30	\$824.03
D5224	Immediate mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and	\$761.30	\$824.03
D5225	Maxillary partial denture – flexible base (including retentive/ clasping materials, rests, and teeth)	\$533.21	\$577.15
D5226	Mandibular partial denture – flexible base (including retentive/ clasping materials, rests, and teeth)	\$533.21	\$577.15
D5410	Adjust complete denture - maxillary	\$36.16	\$39.14
D5411	Adjust complete denture - mandibular	\$36.16	\$39.14
D5421	Adjust partial denture - maxillary	\$33.33	\$36.08
D5422	Adjust partial denture - mandibular	\$33.33	\$36.08
D5511	Repair broken complete denture base, mandibular	\$79.38	\$85.92
D5512	Repair broken complete denture base, maxillary	\$79.38	\$85.92
D5520	Replace missing or broken teeth - complete denture (each tooth)	\$76.76	\$83.09
D5611	Repair resin partial denture base, mandibular	\$73.32	\$79.36
D5612	Repair resin partial denture base, maxillary	\$73.32	\$79.36
D5621	Repair cast partial framework, mandibular	\$96.95	\$104.94
D5622	Repair cast partial framework, maxillary	\$96.95	\$104.94
D5630	Repair or replace broken clasp - per tooth	\$104.80	\$113.44
D5640	Replace broken teeth - per tooth	\$80.54	\$87.18
D5650	Add tooth to existing partial denture	\$108.74	\$117.70
D5660	Add clasp to existing partial denture - per tooth	\$108.69	\$117.65
D5710	Rebase complete maxillary denture	\$236.10	\$255.55
D5711	Rebase complete mandibular denture	\$236.10	\$255.55
D5720	Rebase maxillary partial denture	\$206.39	\$223.40
D5721	Rebase mandibular partial denture	\$206.39	\$223.40
D5730	Reline complete maxillary denture (chairside)	\$136.20	\$147.42
D5731	Reline complete mandibular denture (chairside)	\$136.20	\$147.42
D5740	Reline maxillary partial denture (direct)	\$121.09	\$131.07
D5741	Reline mandibular partial denture (direct)	\$121.09	\$131.07
D5750	Reline complete maxillary denture (laboratory)	\$220.86	\$239.06
D5751	Reline complete mandibular denture (laboratory)	\$220.86	\$239.06
D5760	Reline upper maxillary partial denture (indirect)	\$181.81	\$196.79
D5761	Reline mandibular partial denture (indirect)	\$181.81	\$196.79

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VII. Maxillofacial Prosthetics			
D5986	Fluoride gel carrier	\$87.72	\$94.95
IX. Fixed Prosthodontics Services			
D6241	Pontic - porcelain fused to predominantly base metal	\$460.60	\$498.55
D6242	Pontic - porcelain fused to noble metal	\$531.16	\$574.93
D6245	Pontic – porcelain/ceramic	\$547.54	\$592.66
D6545	Retainer - cast metal for resin bonded fixed prosthesis	\$300.73	\$325.51
D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	\$295.31	\$319.64
D6740	Retainer crown – porcelain/ceramic	\$544.72	\$589.60
D6750	Retainer crown – porcelain fused to high noble metal	\$610.73	\$661.05
D6751	Retainer crown – porcelain fused to predominantly base metal	\$478.46	\$517.89
D6752	Retainer crown – porcelain fused to noble metal	\$506.09	\$547.79
D6930	Re-cement or re-bond fixed partial denture	\$80.34	\$86.96
D6980	Fixed partial denture repair necessitated by restorative material failure.	\$169.40	\$183.36

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X. Oral & Maxillofacial Surgery			
D7111	Extraction, coronal remnants - primary tooth	\$65.60	\$71.01
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$110.40	\$119.50
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	\$135.09	\$146.22
D7220	Removal of impacted tooth - soft tissue	\$164.77	\$178.35
D7230	Removal of impacted tooth - partially bony	\$190.87	\$206.60
D7240	Removal of impacted tooth - completely bony	\$230.27	\$249.24
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	\$291.54	\$315.56
D7250	Removal of residual tooth roots (cutting procedure)	\$116.16	\$125.73
D7251	Coronectomy - intentional partial tooth removal	\$227.48	\$246.22
D7260	Oroantral fistula closure	\$359.87	\$389.52
D7261	Primary closure of a sinus perforation	\$332.20	\$359.57
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	\$214.00	\$231.63
D7280	Exposure of an unerupted tooth	\$234.37	\$253.68
D7283	Placement of device to facilitate eruption of impacted tooth	\$135.35	\$146.50
D7285	Incisional biopsy of oral tissue-hard (bone, tooth)	\$155.61	\$168.43
D7286	Incisional biopsy of oral tissue-soft	\$125.39	\$135.72
D7290	Surgical repositioning of teeth	\$182.53	\$197.57
D7291	Transseptal fiberotomy/supra crestal fiberotomy, by report	\$91.84	\$99.41
D7295	Harvest of bone for use in autogenous grafting procedure	\$394.89	\$427.43
D7310	Alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$125.66	\$136.01
D7311	Alveoloplasty in conjunction with extractions – one (1) to three (3) teeth or tooth spaces, per quadrant	\$94.67	\$102.47
D7320	Alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$157.05	\$169.99
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	\$132.54	\$143.46
D7410	Excision of benign lesion up to 1.25 cm	\$136.60	\$147.86
D7411	Excision of benign lesion greater than 1.25 cm	\$227.54	\$246.29
D7412	Excision of benign lesion, complicated	\$287.01	\$310.66
D7413	Excision of malignant lesion up to 1.25 cm	\$276.96	\$299.78
D7414	Excision of malignant lesion greater than 1.25 cm	\$389.74	\$421.85
D7415	Excision of malignant lesion, complicated	\$449.93	\$487.00
D7440	Excision of malignant tumor - lesion diameter up to 1.25 cm	\$333.30	\$360.76
D7441	Excision of malignant tumor - lesion diameter greater than 1.25 cm	\$434.83	\$470.66
D7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	\$177.17	\$191.77
D7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	\$307.33	\$332.65
D7460	Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm	\$163.60	\$177.08
D7461	Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm	\$318.01	\$344.21
D7465	Destruction of lesion(s) by physical or chemical method, by report	\$118.15	\$127.89

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D7471	Removal of lateral exostosis (maxilla or mandible)	\$187.91	\$203.39
D7472	Removal of torus palatinus	\$249.59	\$270.16
D7473	Removal of torus mandibularis	\$255.54	\$276.60
D7510	Incision and drainage of abscess - intraoral soft tissue	\$85.71	\$92.77
D7511	Incision and drainage of abscess - intraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	\$155.92	\$168.77
D7520	Incision and drainage of abscess - extraoral soft tissue	\$171.81	\$185.97
D7521	Incision and drainage of abscess - extraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	\$251.02	\$271.70
D7530	Removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue	\$123.26	\$133.42
D7540	Removal of reaction producing foreign bodies, musculoskeletal system	\$204.98	\$221.87
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone	\$246.83	\$267.17
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body	\$413.55	\$447.63
D7880	Occlusal orthotic device, by report	\$350.04	\$378.88
D7910	Suture of recent small wounds up to 5 cm	\$103.50	\$112.03
D7911	Complicated suture - up to 5 cm	\$176.38	\$190.91
D7912	Complicated suture - greater than 5 cm	\$278.63	\$301.59
D7953	Bone replacement graft for ridge preservation - per site	\$266.09	\$288.02
D7961	Buccal / labial frenectomy (frenulectomy)	\$158.55	\$171.61
D7962	Lingual frenectomy (frenulectomy)	\$158.92	\$172.02
D7963	Frenuloplasty	\$244.40	\$264.54
D7970	Excision of hyperplastic tissue - per arch	\$192.90	\$208.79
D7971	Excision of pericoronal gingiva	\$98.80	\$106.94
D7972	Surgical reduction of fibrous tuberosity	\$217.57	\$235.50
D7979	Non-surgical sialolithotomy - A sialolith is removed from the gland or ductal portion of the gland without surgical incision into the gland or the duct of the gland; for example, via manual manipulation, ductal dilation, or any other non-surgical method.	\$122.56	\$132.66
D7983	Closure of salivary fistula	\$360.20	\$389.88
D7997	Appliance removal (not by dentist who placed appliance), includes removal of archbar	\$143.28	\$155.09
D7999	Unspecified oral surgery procedure, by report	By Report	By Report
XI. Orthodontics (Orthodontics are not covered services for residents of ICF-IID facilities)			
D8010	Limited orthodontic treatment of the primary dentition	\$1,228.12	\$1,329.32
D8020	Limited orthodontic treatment of the transitional dentition	\$1,228.12	\$1,329.32
D8030	Limited orthodontic treatment of the adolescent dentition	\$1,228.12	\$1,329.32
D8040	Limited orthodontic treatment of adult dentition	\$1,228.12	\$1,329.32
D8070	Comprehensive orthodontic treatment of the transitional dentition	\$2,931.11	\$3,172.63
D8080	Comprehensive orthodontic treatment of the adolescent dentition	\$2,931.11	\$3,172.63
D8090	Comprehensive orthodontic treatment of the adult dentition	\$2,931.11	\$3,172.63
D8210	Removable appliance therapy	\$305.45	\$330.62
D8220	Fixed appliance therapy	\$399.92	\$432.87

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D8660	Pre-orthodontic treatment examination to monitor growth and development	\$49.12	\$53.17
D8670	Periodic orthodontic treatment visit	\$187.09	\$202.51
D8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s))	\$251.11	\$271.80
D8695	Removal of fixed orthodontic appliances for reasons other than completion of treatment	\$142.57	\$154.32
D8696	Repair of orthodontic appliance - maxillary	\$89.56	\$96.94
D8697	Repair of orthodontic appliance - mandibular	\$89.56	\$96.94
D8698	Re-cement or re-bond fixed retainer - maxillary	\$62.35	\$67.49
D8699	Re-cement or re-bond fixed retainer - mandibular	\$62.35	\$67.49
D8703	Replacement of lost or broken retainer - maxillary	\$142.37	\$154.10
D8704	Replacement of lost or broken retainer - mandibular	\$142.37	\$154.10
D8999	Unspecified orthodontic procedure, by report	By Report	By Report
XII. Adjunctive General Services			
D9110	Palliative (emergency) treatment of dental pain - minor procedure	\$66.63	\$72.12
D9222	Deep sedation/general anesthesia - first 15 minutes	\$140.11	\$151.66
D9223	Deep sedation/general anesthesia - each subsequent 15 minute increment	\$140.11	\$151.66
D9230	Inhalation of nitrous oxide/analgesia, anxiolysis	\$34.80	\$37.67
D9239	Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	\$140.11	\$151.66
D9243	Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	\$140.11	\$151.66
D9248	Non-intravenous conscious sedation	\$167.84	\$181.67
D9310	Consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician	\$55.78	\$60.38
D9410	House/extended care facility call	\$46.41	\$50.23
D9420	Hospital or ambulatory surgical center call	\$90.49	\$97.95
D9920	Behavior management, by report	\$62.30	\$67.43
D9944	Occlusal guard - hard appliance, full arch	\$247.67	\$268.08
D9945	Occlusal guard - soft appliance, full arch	\$247.67	\$268.08
D9946	Occlusal guard - hard appliance, partial arch	\$247.67	\$268.08
D9986	Missed appointment	\$0.00	\$0.00
D9992	Dental case management - care coordination	\$22.72	\$24.59
D9995	Teledentistry - synchronous; real-time encounter reported in addition to other procedures (e.g., diagnostic) delivered to the patient on the date of service	\$0	\$0
D9996	Teledentistry - asynchronous; information stored and forwarded to dentist for subsequent review	\$0	\$0
D9999	Unspecified adjunctive procedure, by report	By Report	By Report